PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

04/20/2004

Edward R Gates Wolf Greenfield & Sacks Federal Reserve Plaza 600 Atlantic Avenue Boston, MA 02210-2211

07/13/2004 HDEMESS2 .00000097_09445733-



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Maureen Joyce) _	(Depositor's name)
Maureen,	man	(Signature)
July 8 , 2004) 1	(Date)

01 FE 150 APPLICATION NO.

XIssue Fee

☐ Publication Fee

☐ Advance Order - # of Copies

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

09/445,733

08/29/2000

Victor M. Ilyashenko

B1029/7001

1310

TITLE OF INVENTION: POLYMERIC OPTICAL ARTICLES

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Assignee NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment hen previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Billerica, Massachusetts	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
Change of correspondence address or indication of "Fee Address" (37 R i.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment here previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)	nonprovisional	NO	\$1330	\$0	\$1330	07/20/2004	
Change of correspondence address or indication of "Fee Address" (37 R 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form pto to 3 registered patent attorneys or agents or agents or agents or periodic patent attorneys or agents. If no name is listed, no name will be printed. Change of correspondence address (or Change of Correspondence Address in the patent Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form pto to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Change of Correspondence address (or Change of Correspondence attorney or agents or periodic a	EXAN	MINER	ART UNIT	CLASS-SUBCLASS	ך		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. The Patent (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment hopeen previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE Massachusetts Inames of up to 3 registered patent attorneys or agents and attorneys or agents. If no name is listed, no name will be printed. 2 agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed. 3 agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed. 3 agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. 4 assignment in the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 5 agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. 5 agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. 6 agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. 7 agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents. If no name is listed, no name will be printed. 8 assignment attorneys or agents. If no name is listed, no name or printed. 9	VARGOT, 1	MATHIEU D	1732	264-001240	_	•	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment hebeen previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Billerica, Massachusetts	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer		orrespondence agents firm (agent) on form attorne	names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name			
v v	PLEASE NOTE: Unless been previously submitte	an assignee is identified bel ed to the USPTO or is being s	ow, no assignee data will a ubmitted under separate cov	ppear on the patent. Inclusion of er. Completion of this form is NC		te when an assignment has gnment.	
asse check the appropriate assignee category or categories (will not be printed on the natent).	Getronics Wa	ng Co. LLC.	Bill	erica, Massachuse	tts		
so chock his appropriate assistics category of categories (with his or printed on the patent). — I individual 😝 corporation of other private group entity — I governme	ase check the appropriate	e assignee category or catego	ries (will not be printed on t	he patent): 🚨 individual 💆	corporation or other private gro	oup entity	

X A check in the amount of the fee(s) is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

Authorized Signature)	100	(Date)
Authorized Signature)	1.102 L	07-08-2004
NOTE; The Issue Fee	nd Publication Fee (if	required) will not be accepted from any

NOTE; The Issue Fee thd Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

07/13/2004 HDEMESS2 00000097 09445733

X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23/2825 (enclose an extra copy of this form).

01 FC:1501

1330.00 OP

JUL 1 2 2004 6

DOCKET NO.: B1029.70001US00

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Victor M. Ilyashenko

Serial No:

09/445,733

Confirmation. No.:

1310

Filed:

August 29, 2000

For:

POLYMERIC OPTICAL ARTICLES

Examiner:

Mathieu D. Vargot

Art Unit:

1732

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being placed in the United States mail with first-class postage attached, addressed to MAIL STOP Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the day of July, 2004.

Maureen Joyce

Mail Stop Issue Fee

Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith are the following documents:

[X] Part B - Issue Fee Transmittal

[X] Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 720-3500, Boston, Massachusetts.

A check in the amount of \$1,330.00 is enclosed to cover the issue fee. If the fee is insufficient, the balance may be charged to Deposit Account 23/2825.

Serial No.: 09/445,733 Confirmation No.: 1310

Docket No.: B1029.70001US00

Page 2 of 2

A duplicate of this sheet is enclosed.

Respectfully submitted,

Michael J. Pomignek, Ph.D., Reg. No.: 46,190 Edward R. Gates, Reg. No.: 31,616

Wolf, Greenfield & Sacks, P.C.

600 Atlantic Avenue

Boston, Massachusetts 02210-2211

Telephone: (617)720-3500

Date: July **8**, 2004

x07/20/04x 806597